



WOODBURN

FIREHOUSE COOK-OFF

Name of team: _____

Chief Cook: _____

Team Members: 1. _____
2. _____
3. _____
4. _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____

Categories / (\$50.00 each selection) (Please check those you will cook in)

_____ Beef

_____ Pork Ribs **Note: Meat will be provided at 6:00AM Saturday morning**

_____ Chicken

Entry fee must be paid when submitting entry form to be officially entered.

Make Payments to : **Woodburn Firehouse cook-off**
 PO Box 529
 Woodburn, Or 97071

Phone: 503-816-1434

Woodburnfirehousecookoff.com